

# **COMPLIANCE CHECKLIST**

## **► Surgical Suites**

The following Checklist is for plan review of hospital facilities, and is derived from the AIA/HHS Guidelines for Design and Construction of Health Care Facilities, 2006 Edition (specific sections indicated below), appropriately modified to respond to DPH requirements for projects in Massachusetts which include Hospital Licensure Regulations 105 CMR 130.000 and Department Policies. Applicants must verify compliance of the plans submitted to the Department with all the requirements of the AIA/HHS Guidelines, Licensure Regulations and Department Policies when filling out this Checklist. The completed DPH Affidavit Form must be included in the plan review submission for Self-Certification or Abbreviated Review Part II.

Other jurisdictions, regulations and codes may have additional requirements which are not included in this checklist, such as:

- NFPA 101 Life Safety Code (2000) and applicable related standards contained in the appendices of the Code.
- State Building Code (780 CMR).
- Joint Commission on the Accreditation of Health Care Organizations.
- CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities.
- Accessibility Guidelines of the Americans with Disabilities Act (ADA).
- Architectural Access Board Regulations (521 CMR).
- Local Authorities having jurisdiction.

### Instructions:

1. The Checklist must be filled out completely with each application.
2. Each requirement line (\_\_\_\_) of this Checklist must be filled in with one of the following symbols, unless otherwise directed. If an entire Checklist section is not affected by a renovation project, "E" for existing conditions may be indicated on the requirement line (\_\_\_\_) before the section title (e.g. E PATIENT ROOMS). If more than one space serves a given required function (e.g. patient room or exam room), two symbols separated by a slash may be used (e.g. "E/X"). Clarification should be provided in that regard in the Project Narrative.
 

<p><b>X</b> = Requirement is met, for new space, for renovated space, or for existing support space for an expanded service.</p> <p><b>E</b> = Requirement relative to an existing suite or area that has been <i>licensed</i> for its designated function, is <i>not affected</i> by the construction project and <i>does not pertain to a required support space</i> for the specific service affected by the project.</p>	<p><input checked="" type="checkbox"/> = Check box under section titles or individual requirements lines for optional services or functions that are not included in the health care facility.</p> <p><b>W</b> = Waiver requested for Guidelines, Regulation or Policy, where hardship in meeting requirement can be proven (please complete Waiver Form for each waiver request, attach 8½" x 11" plan &amp; list the requirement reference # on the affidavit).</p>
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3. Mechanical, electrical & plumbing requirements are only partially mentioned in this checklist. Section **2.1-10** of the Guidelines must be used for project compliance with all MEP requirements and for waiver references.
4. Oxygen, vacuum & medical air outlets are identified respectively by the abbreviations "OX", "VAC" & "MA".
5. Text items preceded by bullets (▪), if included, refer to the recommendations of the Appendices of the Guidelines, and are DPH recommendations only. No symbol is expected for these items.
6. Requirements referred to as "Policies" are DPH interpretations of the AIA Guidelines or of the Regulations.
7. Reference to a requirement from the AIA Guidelines in any waiver request must include the chapter number (e.g. "**2.1-**" and the specific section number.

Facility Name:

DoN Project Number: (if applicable)

Facility Address:

Satellite Name: (if applicable)

Building/Floor Location:

Satellite Address: (if applicable)

Submission Dates:

Project Description:

Initial Date:

Revision Date:

Note: All room functions marked with "X" must be shown on the plans with the same name labels as in this checklist.

**2.1- ARCHITECTURAL REQUIREMENTS****MECHANICAL/PLUMBING/  
ELECTRICAL REQUIREMENTS**GENERAL LAYOUT

- 5.3.1.2(1)** ☐ Design prevents non-related traffic through surgical suite
- 5.3.1.2(3)** ☐ Sterile core  
☐ check if service not included in surg. suite  
☐ no traffic or flow of materials from soiled areas to clean/sterile areas
- 5.3.1.2(4)** ☐ Surgical suite divided into 3 contiguous areas:  
☐ unrestricted (control point monitoring general access)  
☐ semi-restricted (peripheral support spaces)  
☐ restricted (ORs & immediate support spaces)

OPERATING ROOMS

- 5.3.2.1(1)** ☐ General operating rooms  
☐ Extensive Construction ☐ Limited Renovations  
☐ New/Relocated Service  
☐ min. 400 sf clear ☐ min. 360 sf clear  
☐ min. dimension 20'-0" ☐ min. dimension 18'-0"
- 5.3.2.2** ☐ Orthopedic operating rooms  
☐ check if service not included in surg. suite  
☐ Extensive Construction ☐ Limited Renovations  
☐ New/Relocated Service  
☐ min. 600 sf clear ☐ min. 360 sf clear  
☐ min. dimension 20'-0" ☐ min. dimension 18'-0"
- 5.3.2.3** ☐ Enclosed storage for splints & traction equipt
- 5.3.2.2** ☐ Cardiovascular & neurological operating rooms  
☐ check if service not included in surg. suite  
☐ Extensive Construction ☐ Limited Renovations  
☐ New/Relocated Service  
☐ min. 600 sf clear ☐ min. 400 sf clear  
☐ min. dimension 20'-0" ☐ min. dimension 18'-0"  
☐ equipment storage ☐ equipment storage
- ☐ open-heart surgery  
☐ check if service not included in surg. suite  
☐ pump room connected to cardiovascular OR
- 5.3.2.4** ☐ Surgical cystoscopy room  
☐ check if service not included in surg. suite  
☐ Extensive Construction ☐ Limited Renovations  
☐ New/Relocated Service  
☐ min. 350 sf clear ☐ min. 250 sf clear  
☐ min. dimension 15'-0"

Ventilation\*

- ☐ min. 15 air ch./hr  
☐ positive pressure  
☐ supply diffusers center of ceiling  
☐ 2 remote return registers at floor level  
☐ anesthesia scavenging  
☐ individual temperature controls

Plumbing\*

- ☐ no floor drains

Medical gases\*

- general, cardio., ortho., neuro.  
☐ 2 OX, 3 VAC  
cystoscopy  
☐ 1 OX, 3 VAC

Electrical\*

- ☐ special lighting at operating table  
☐ general lighting  
☐ separate circuits  
☐ X-ray illumination for 4 films
- ☐ 8 elec. duplex receptacles  
+ special receptacles  
☐ including 6 receptacles at head of operating table  
☐ lighting on emergency power  
☐ all receptacles & fixed equipment on emergency power  
☐ emergency communication

\*Common requirements for all operating rooms

**2.1- ARCHITECTURAL REQUIREMENTS****5.3.3.1/ 5.3.5.7** PRE-OPERATIVE PATIENT HOLDING AREAS

(semi-restricted)

- ☐ stretcher holding area
  - ☐ min. 80 sf for each stretcher station
  - ☐ cubicle curtains
  - ☐ 4'-0" minimum clearance between stretchers, and between stretchers & adjacent walls
- ☐ Sitting space for ambulatory patients
- ☐ Under visual control of nursing staff
- ☐ Provisions for isolation

**5.3.3.2** POST-ANESTHETIC CARE UNITS (PACUs)

(semi-restricted)

PACU bed areas:

- ☐ min. 80 sf for each bed area
- ☐ cubicle curtains
- ☐ 5'-0" minimum clearance between beds
- ☐ 4'-0" min. clearance between beds & adjacent walls

**5.3.3.3(2)**  
(b)/Policy

- ☐ PACU isolation room
  - ☐ check if service not included in surg. suite
  - ☐ min. 100 sf
  - ☐ 4'-0" min. clearance between beds & adjacent walls

**5.3.3.2(4)**

- ☐ Nurses station/charting
- ☐ Medication station
- ☐ Stretcher storage
- ☐ Supply & equipment storage
- ☐ Direct access to surgical suite
- ☐ Staff toilet

SUPPORT AREAS (restricted)**5.3.5.4**

- ☐ Scrub facilities
  - ☐ 2 scrub positions at operating room entrance (may be shared by 2 ORs)
  - ☐ located in restricted area
  - ☐ located outside the sterile core
  - ☐ arranged to minimize splatter
  - ☐ scrub sinks recessed in alcove off corridor
  - ☐ view windows to ORs interiors

**5.3.5.8**

- ☐ Substerile room(s)
  - ☐ direct access from two or more operating rooms
  - ☐ flash sterilizer
  - ☐ warming cabinet
  - ☐ sterile supplies storage
- ☐ Sterilizing facilities
  - ☐ access from restricted corridor
  - ☐ convenient to operating rooms

**MECHANICAL/PLUMBING/  
ELECTRICAL REQUIREMENTS**☐ Vent. min. 6 air ch./hr

- ☐ Handwashing stations
  - ☐ 1 station per 4 beds
  - ☐ uniform distribution
- ☐ Clinical sink & bedpan cleaning system
  - ☐ Vent. min. 6 air ch./hr
  - ☐ 1 OX, 3 VAC, 1 MA for each bed
  - ☐ Nurses call button at each bed
  - ☐ Emergency power & lighting

- ☐ Handwashing station
  - ☐ Vent. min. 12 air ch./hr
  - ☐ negative pressure
  - ☐ all air exhausted to outdoors
  - ☐ 1 OX, 3 VAC & 1 MA
  - ☐ Nurses call button
  - ☐ Emergency power & lighting

- ☐ Duty station (audio/visual)
- ☐ Emergency communication system

- ☐ Scrub sinks
  - ☐ knee or foot controls
  - or**
  - ☐ electronic sensor controls

- ☐ Handwashing station
  - ☐ Vent. min. 4 air ch./hr
  - ☐ Temperature & moisture control
  - ☐ Duty station (audio/visual)
- ☐ Handwashing station

**2.1- ARCHITECTURAL REQUIREMENTS****MECHANICAL/PLUMBING/  
ELECTRICAL REQUIREMENTS****5.3.5** SUPPORT AREAS (semi-restricted)

- 5.3.5.1** ☐ Control station
- 5.3.5.2** ☐ Supervisor's office or station
- 5.3.5.3** ☐ Dictation & report preparation area

- 5.3.5.6** ☐ Ice machine

**2.3.4**

Medication station

- |  |  |
|--|--|
| <input type="checkbox"/> Medicine prep. room <b>or</b><br><input type="checkbox"/> visual control from nurses station<br><input type="checkbox"/> work counter<br><input type="checkbox"/> handwashing station<br><input type="checkbox"/> refrigerator<br><input type="checkbox"/> locked storage | <input type="checkbox"/> Self-contained medicine dispensing unit<br><input type="checkbox"/> adequate security for controlled drugs<br><input type="checkbox"/> adequate lighting<br><input type="checkbox"/> convenient access to handwashing station |
|--|--|

- ☐ Vent. min. 4 air ch./hr
- ☐ Emergency power/lighting
- ☐ Duty station visible call signal

**5.3.5.9**

- |  |   |
|--|---|
| <input type="checkbox"/> Clean workroom: <b>or</b><br><input type="checkbox"/> counter<br><input type="checkbox"/> handwashing station<br><input type="checkbox"/> storage facilities<br><input type="checkbox"/> space to package reusable items<br><input type="checkbox"/> no connection with soiled workroom<br><input type="checkbox"/> no cross traffic through clean workroom/supply room | <input type="checkbox"/> Clean supply room (for holding clean & sterile materials from central supplies area):<br><input type="checkbox"/> storage facilities |
|--|---|

- ☐ Vent. min. 4 air ch./hr
- ☐ Temperature & moisture control
- ☐ Duty station call signal (audio/visual)

**5.3.5.10**

- ☐ Soiled workroom
- ☐ work counter
- ☐ space for waste & soiled linen receptacles
- ☐ no connection with clean & sterile areas
- ☐ restricted area

- ☐ Flushing-rim clinical sink
- ☐ Handwashing station
- ☐ Vent. min. 10 air ch./hr (exhaust)

**5.3.5.11**

- ☐ Anesthesia workroom
- ☐ work counter(s) & racks for cylinders
- ☐ separate storage for clean & soiled items
- ☐ case cart & equipt storage

- ☐ 1 OX & 1 MA per workstation
- ☐ Sink(s)
- ☐ Vent. min. 8 air ch./hr
- ☐ all air exhausted to outdoors

**5.3.5.14**

(1)

- ☐ Equipment storage room(s)
- ☐ min. 150 sf
- ☐ min. 50 sf/OR

- ☐ Duty station visible call signal
- ☐ Vent. min. 4 air ch./hr

(2)

- ☐ Storage areas for portable OR equipment
- ☐ out of corridors and traffic

(3)

- ☐ Medical gas storage facilities

- ☐ Vent. min. 8 air ch./hr
- ☐ all air exhausted to outdoors

**5.3.6.2**

- ☐ Staff clothing change areas
- ☐ lockers
- ☐ showers
- ☐ toilets

- ☐ Handwashing stations
- ☐ Vent. min. 10 air ch./hr (exhaust)

- ☐ space for donning surgical attire
- ☐ one-way traffic pattern directly into surgical suite

**5.3.6.1**

(2)

- ☐ Staff lounge
- ☐ toilet room

- ☐ Handwashing station
- ☐ Vent. min. 10 air ch./hr (exhaust)

- ☐ located for convenient access to recovery room

**2.1- ARCHITECTURAL REQUIREMENTS****MECHANICAL/PLUMBING/  
ELECTRICAL REQUIREMENTS****5.3.5.12**

- (1) ☐ Refrigerated blood bank storage  
 (2) ☐ Refrigerated organ storage  
☐ check if service not included in surg. suite

**5.3.5.13** ☐ Provisions for storage of pathological specimens

**5.3.4.2** ☐ Frozen section lab

**5.3.5.15** ☐ Housekeeping facilities  
☐ exclusively for and directly accessible from suite  
☐ storage for housekeeping supplies & equipment

☐ Service sink or floor receptor  
☐ Vent. min. 10 air ch./hr (exhaust)

**5.3.1.3** ☐ OUTPATIENT SURGERY

☐ check if service not included in surgical suite

**5.3.1.3(1)** ☐ Outpatient Surgical Facilities Checklist **OP9** is attached

**5.3.3.3**

- ☐ Phase II recovery suite  
☐ nurses station  
☐ charting facilities  
☐ storage space for supplies & equipment  
☐ staff toilet room  
☐ patient recovery area  
☐ direct access to PACU  
☐ min. 50 sf for each patient lounge chair in  
curtained cubicle  
☐ privacy curtains  
☐ min. 4'-0" clearance between lounge chairs  
☐ min. 4'-0" clearance between each end  
lounge chairs and adjacent walls  
☐ min. 100 sf in semi-enclosed bay  
☐ no semi-enclosed bay  
☐ min. 4'-0" clearance between lounge chairs  
and adjacent walls

☐ Handwashing station  
☐ Vent. min. 10 air ch./hr (exhaust)

Handwashing stations:  
☐ 1 station per 4 beds  
☐ uniform distribution  
☐ Clinical sink & bedpan cleaning  
system  
☐ Vent. min. 6 air ch./hr  
☐ 1 OX & 3 VAC for each cubicle or bay  
☐ Nurses call button at each bed  
☐ Emergency power & lighting

**5.3.3.3(4)** ☐ patient toilet room directly accessible  
 (b) ☐ sized for patient & assistant

☐ Handwashing station  
☐ Vent. min. 10 air ch./hr (exhaust)

**5.3.7.1**

- ☐ Outpatient clothing change areas  
☐ waiting room  
☐ dressing rooms **or** ☐ private holding cubicles  
☐ lockers  
☐ toilet room

☐ Handwashing station  
☐ Vent. min. 10 air ch./hr (exhaust)

**5.3.4**

- ☐ Provisions for exam, interview, preparation & testing of  
surgical outpatients  
☐ Hospital Outpatient Departments Checklist **OP1** is  
attached

**GENERAL STANDARDS****DETAILS AND FINISHES****Corridors**

▷ New Construction or Renovations for New Inpatient Corridor\*

\_\_\_ Min. corridor width 8'-0" (NFPA 101)

\*No waivers accepted

\_\_\_ Min. staff corridor width 5'-0" (8.2.2.1(1))

\_\_\_ Fixed & portable equipment does not reduce required corridor width (8.2.2.1(2))

\_\_\_ Work alcoves include standing space that does not interfere with corridor width (Policy)

☐ check if function not included in surg. suite

**Ceiling Height (8.2.2.2)**

\_\_\_ Ceiling height min. 7'-10", except:

\_\_\_ 7'-8" in corridors, toilet rooms, storage rooms

\_\_\_ sufficient for ceiling mounted equipment

\_\_\_ min. clearance under suspended pipes/tracks:

\_\_\_ 7'-0" AFF in bed/stretchers traffic areas

\_\_\_ 6'-8" AFF in other areas

**Doors (8.2.2.3)**

\_\_\_ All doors are swing-type

\_\_\_ Doors for stretchers or wheelchairs min. 2'-10" wide

\_\_\_ Doors to occupiable rooms do not swing into corridors

\_\_\_ Toilet room doors are outswinging or double-acting

\_\_\_ Emergency access hardware on patient toilet doors

**Glazing (8.2.2.7)**

\_\_\_ Safety glazing or no glazing under 60" AFF & within 12" of door jamb

**Handwashing Stations (8.2.2.8)**

\_\_\_ Handwashing sink

\_\_\_ Soap dispenser

\_\_\_ Hand drying facilities

**Grab Bars (8.2.2.9)**

\_\_\_ Grab bars in all patient toilets & bathing facilities

\_\_\_ 1½" wall clearance

\_\_\_ 250 lb. Capacity

**Noise Reduction**

\_\_\_ Noise reduction at patient rooms as per Table 2.1-1

**Floors**

\_\_\_ Thresholds & exp. joints flush with floor surface (8.2.2.4)

\_\_\_ Floors easily cleanable & wear-resistant (8.2.3.2)

\_\_\_ Non-slip floors in wet areas

\_\_\_ Wet cleaned flooring resists detergents

\_\_\_ Operating room floors & wall bases are monolithic & joint-free

**Walls (8.2.3.3)**

\_\_\_ Wall finishes are washable

\_\_\_ Smooth/water-resist. finishes at plumbing fixtures

**Ceilings (8.2.3.4)**

\_\_\_ Restricted areas (e.g. operating rooms)

\_\_\_ monolithic ceilings

\_\_\_ Semi-restricted areas

\_\_\_ monolithic ceilings

or ☐ washable ceiling tiles  
☐ gasketed or clipped-down joints

**PLUMBING (10.1)**

\_\_\_ Handwashing sinks

\_\_\_ hot & cold water

\_\_\_ anchored to withstand 250 lbs. (8.2.2.8)

\_\_\_ wrist controls or other hands-free controls at all handwashing sinks (1.6-2.1.3.2)

\_\_\_ No drainage piping above ceiling in operating rooms

\_\_\_ No floor drain in operating rooms

\_\_\_ Medical gas outlets provided per Table 2.1-5

**MECHANICAL (10.2)**

\_\_\_ Mech. ventilation provided per Table 2.1-2

\_\_\_ Exhaust fans located at discharge end (10.2.4.3)

\_\_\_ Fresh air intakes located at least 25 ft from exhaust outlet or other source of noxious fumes (10.2.4.4)

\_\_\_ Contaminated exhaust outlets located above roof

\_\_\_ Ventilation openings at least 3" above floor

\_\_\_ Central HVAC system filters provided per Table 2.1-3

**ELECTRICAL (10.3)**

\_\_\_ Emergency power provided to all essential services complies with NFPA 99, NFPA 101 & NFPA 110 (10.3.4.1)

\_\_\_ nurses call system connected to emergency power circuits

\_\_\_ electronic sink controls connected to emergency power circuits (10.3.6.3)

☐ check if function not included in surg. suite

\_\_\_ Duplex, grounded receptacles max. 50 feet apart in corridors, max. 25 feet from corridor ends (10.3.7.1)